

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND | | | | |
|---|-----------------------------------|---|--------------|------------------|
| 1 Date of Request: <u>7-28-05</u> | | 2 Serial/Patent # <u>10/526909</u> | | |
| 3 Please refund the following fee(s): | | 4 PAPER NUMBER | 5 DATE FILED | 6 AMOUNT |
| | Filing | | | \$ |
| | Amendment | | | \$ |
| | Extension of Time | | | \$ |
| | Notice of Appeal/Appeal | | | \$ |
| | Petition | | | \$ |
| | Issue | | | \$ |
| | Cert of Correction/Terminal Disc. | | | \$ |
| | Maintenance | | | \$ |
| | Assignment | | | \$ |
| | Other | | | \$ |
| | | 7 TOTAL AMOUNT OF REFUND | | \$ <u>100.00</u> |
| | | 8 TO BE REFUNDED BY: | | |
| 10 REASON: | | <div style="border: 1px solid black; padding: 5px;"> Treasury Check <input checked="" type="checkbox"/> Credit Deposit A/C #: 9 50--0392 </div> | | |
| Overpayment | | | | |
| Duplicate Payment | | | | |
| No Fee Due (Explanation): | | | | |
| | | | | |
| | | | | |
| | | | | |
| 11 REFUND REQUESTED BY: | | | | |
| TYPED/PRINTED NAME: <u>B.A.C.</u> | | TITLE: _____ | | |
| SIGNATURE: <u>BKC</u> | | PHONE: _____ | | |
| OFFICE: <u>PT-DO-EO</u> | | <small>Repln. Ref: 07/29/2005 BCAMPBEL 0018480200</small> <small>FC: 9204</small> | | |
| ***** THIS SPACE RESERVED FOR FINANCE USE ONLY: \$100.00 CR | | | | |
| APPROVED: _____ | | DATE: _____ | | |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: